Amendment

Disclosure Report Cover

Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information.

1. Committee In	formation :	传数纹霉			表表表				
a. Full Name	D COLDICII		735.55 		^FI\/	/ FT	ć. ID Number		
BILL PATE FO	OR COUNCIL	·			RECEIV				
b. Mailing Addre		y, State and Zip	Code)			ńy proc	d. Date Filed		
110 EAGLE POINT LANE SOUTHERN PINES, NC 28387					JAN 03 20	20	12/27/2019		
200 i eigivia i i	INES, INC 20.)					e. Phone Number		
				M	OORE	BOE	(910) 725-1053		
2. Report Year	3. Period Star	t Date (mm/dd/yy	v) 🖖	4 Period End Da			er Full Name 💎 🗾		
2019	10)/22/2019		12/31/2	2019	WILLIAN	1 Н РАТЕ		
6. Type of Comm			man and the same			type of rep	ort from one category)		
Candidate Cam			Munic	the second section of the second section of the second section of the second section s	State/County		Referendum Organizational		
☐ Joint Fundraise ☐ Referendum	_			Organizational Thirty-five day	☐ Organizatio Quarterly	nai	Pre-referendum		
7. Type of Fund				Pre-primary	First		Final		
"Booster Fund			H	Pre-election	Second		Supplemental Final		
Building Fund		l'	<u> </u>	Pre-runoff	Third		Annual		
Presidential El	lection Year Can	didates Fund		Semi-annual	Fourth		☐ Special		
☐ NC Public Can	npaign Financing	Fund		Mid Year	Semi-annua	1			
			X	Year End	☐ Mid Ye		10. Special Report Name		
Other:			□	Final	Year E	nd			
8. Number of Fu	indraisers this	Report		Special	☐ Final				
	0				Special				
3. Account Infor			14. 1		ount Informat				
a. Financial Insti	itution Full Na	me	AUTAVON BUVALL	a. Fina	incial Institutio	on Full Nam	e° s		
FIRST BANK									
b. Purpose		c. Account Code	<u> 1</u> 740	b. Pur	pose		c. Account Code		
TOWN COUNC	CIL		1						
CAMPAIGN			- 400	** 8. 0 (170 Leo ())			d. Period Begin Balance		
		d. Period Begin	Вагап	nce					
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CERTIFICATIO	N-								
I certify that th	he Committee o						2A, 22B & 22D-22M of		
							other non-disclosed		
funds. I furth	er certify that t	his report is con	aplete.	, true and correct a	ind that I have	been train	ed by the NC State Board		
Willia.	in H Pat			1/1/11	Meri H. V.	6	01/03/2020		
P ₁	rinted Name of S	Soner		Signature of	Appointed Trea	surer	Date		
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Please Not							ittee address, treasurer,		
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Y	/ou must amen	d the Statement	of Org	ganization (CRO-2	100A -E) to mai	ke committe	e changes		

ACON COUNTY POLICE GOVY

Detailed Summary
Use this form to summarize all disclosure reporting forms and to total monetary information

Amendment □ Yes 🔯 No

	Type of Re	port	3.	D Num	er
BILL PATE FOR COUNCIL 20	019 Year E	nd Semi-A	Annual		
Start of Election Cycle: January 1, 2019		tal this ing Period	Total this Election Cycle		
4) Cash on Hand at Start	\$ 1,589.49		\$	0.00	
RECEIPTS		South Control			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	340.00	\$	1,230.00
6) Contributions from Individuals	(CRO-1210)	\$	1,282.84	\$	7,162.84
7) Contributions from Political Party Committees	(CRO-1220)	\$	0.00	\$	0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$	0.00	\$	500.00
9) Loan Proceeds	(CRO-1410)	\$	0.00	\$	0.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	0.00	\$	0.00
11) Other Receipt Sources					
11a) Interest on Bank Accounts	(CRO-1250)	\$	0.00	\$	0.00
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$	0.00	\$	0.00
11c) Outside Sources of Income	(CRO-1250)	\$	0.00	\$	0.00
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	0.00	\$	0.00
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	0.00	\$	0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11	d and 11e)	\$	1,622.84	\$	8,892.84
<u>EXPENDITURES</u>	(1) (1) (2) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	ili (Milai Lina) Sistemati (Milai) Sistemati (Milai Sistemati)		ineralija Rođen	
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$	1,518.70	\$	7,194.21
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	0.00	\$	0.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$	0.00	\$	0.00
14) Aggregated Non-Media Expenditures	CRO-1315)	\$	0.00	\$	0.00
15) Loan Repayments	(CRO-1420)	\$	0.00	\$	0.00
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$	0.00	\$	0.00
17) In-Kind Contributions	(CRO-1510)	\$	932.84	\$	937.84
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 1	6 and 17)	·\$	2,451.54	\$	8,132.05
19) Cash on Hand at End (Add lines 4 and 12 together, then subtra	act line 18)	\$	760.79	\$	760.79
ADDITIONAL INFORMATION	p avartati				
	(CRO-1330)	\$	0.00		
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	0.00	1000	
22) Debts and Obligations owed by the Committee (CRO-1610)	\$	0.00		
23) Debts and Obligations owed to the Committee	CRO-1620)	\$	0.00		
24) Account Transfers Within the Committee	CRO-1720)	\$	0.00		
25) Administrative Support	CRO-1710)	\$	0.00	\$	0.00
26) Forgiven Loans	(CRO-1440)	\$	0.00	\$	0.00
27) 48-Hour Notice Reports Sum	'CRO-2220)	\$	0.00	\$	0.00
28) Contributions to be Refunded	CRO-1215)	\$	0.00	\$	0.00

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Amendment Aggregated Contributions from Individuals Page X No Yes Optional form used to report NC Contributions From Individuals of \$50 or less 1. Committee Bull Name (and Fund fapplicable) BILL PATE FOR COUNCIL 3. Contributor Information a. Amend c. Form of Payment d. In-Kind Description b. Account Code e. Date (mm/dd/yyyy) f. Amount Add Check 10/25/2019 40.00 ☐ Remove Add 1 Check 10/28/2019 \$ 50.00 Remove Add 1 Check 10/24/2019 \$ 50.00 Remove Add 1 Check 10/24/2019 \$ 50.00 ☐ Remove Add 1 Check 10/24/2019 \$ 50.00 ■ Remove Add 1 Check 10/24/2019 \$ 50.00 Remove Add 1 Check 10/22/2019 \$ 50.00 ☐ Remove 4. Total only this Page \$ \$340.00 5. Total of ALL CRO-1205 Pages \$ \$340.00 (This line must be on line 5 of Detailed Summary Page CRO-1100)

NC State Board of Elections

April 2007

CRO-1205

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		rom Individuals		Pg	$g = \frac{1}{500000000000000000000000000000000000$		☐ Yes	No No	
Use un	s form to report in	ndividual contributions	s over \$50 or c	ontributions ur	nder \$50 if form CRO				
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	HURST, NC 2837			ART BLUE		<u> </u>			
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	ude city, state, & z			AUTHOR	Oleanion The Carles	<u> </u>	30111111-4-2-1		
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Contributions from Individuals

Pg 2 of 2

Yes No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

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BILLF	ATE FOR COU	NCIL					•		
3. Cont	ributor Informati	on K		Add 🔲 Re	move in The State		1 - 14	210 25 1	
a. Full Name, Mailing Address & Phone				b. Job Title/Profession			omments		
(include city, state, & zip)				RETIRED					
EDWARD J OWEN 310 CREST ROAD				c. Employer's Name/Specific Field					
	EST ROAD HERN PINES, NO	C 28387		N/A					
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49 PADDOCK LANE				c. Employer's Name/Specific Field					
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Amendment

Disbursements ☐ Yes X No Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures 1. Committee Full Name (and Fund if applicable) BILL PATE FOR COUNCIL 3: Type of Disbursement – (Please use separate CRO-1310 forms for each type of Disbursement) – 🦸 X Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures 4. Payee Information □ Add □ Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name (include city, state, & zip) LAURA FRANCIS c. Level Registered (Specify) 3 THUNDERBIRD CIRCLE Federal County: PINEHURST, NC 28387 ☐ State Municipality: e. Election Sum to Date 160.00 f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks Check 0 MARKETING/SOCIAL 11/18/2019 \$ 160.00 MEDIA 4. Payee Information □ Add □ Remove ... a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) VILLAGE PRINTERS c. Level Registered (Specify) **50 RATTLESNAKE TRAIL** County: Federal PINEHURST, NC 28374 ☐ State Municipality: e. Election Sum to Date 4.040.70 f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks Debit Card ABI 10/27/2019 1,258.70 EDDM POSTAGE \$ 4. Payee Information Add Remove b. Coordinated Committee Name a. Full Name, Mailing Address & Phone (include city, state, & zip) KRISTAN WATTS c. Level Registered (Specify) 167 BEVERLY LANE Federal County: SOUTHERN PINES, NC 28387 ☐ State Municipality: e. Election Sum to Date 100.00 f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks 1 Check 11/15/2019 100.00 FEE FOR SIGN PICK-UPS 5. Total only this Page 🖟 \$ 1,518.70 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) \$ 1,518.70 (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures) 7. Purpose Codes (List detailed expenditure code in (h.) aboye) A* - Media B* - Printing C* - Fundraising D - To Another Candidate E - Salaries F* - Equipment G - Political Party H* - Holding Public Office Expenses I - Postage J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Fund O* Other

In-Kind Contributions Use this form to report non-monetary contributions, donation Use CRO-1215 if In-Kind Contributions were or will be re-	Pg is, goods or serv	1 of rices provided to	1 the com	Amenda Yes	X No
I. Committee Full Name (and Fund of applicable) BILL PATE FOR COUNCIL			2. ID N	umber =	
	Add Rer b. Type of Con Individual Candidate Party PAC Referendum Other Recei	tribúlór	c. Com d. Elect	ments	to Date 1,022.68
e. Description	77.5% (10.546)	f. Date (mm/dd	уууу)	g. Fair N	larket Amount
CANDIDATE MEET AND GREET FOOD/DRINKS	· · ·	10/24/20	19	\$	522.68

☐ Add# ☐ Remove 2.2.3

X Individual

Candidate

☐ Referendum

Party

□ PAC

b. Type of Contributor

Other Receipt Source

f. Date (mm/dd/yyyy)

10/22/2019

c. Comments

d. Dection Sum to Date

\$

g. Fair Market Amount

300.00

300.00

3. Contributor Information **
a. Full Name, Mailing Address & Phone

BLAINE RINEY

e. Description

134 NATIONAL DRIVE

PINEHURST, NC 28374

MEET AND GREET EXPENSES

(include city, state, & zip)